

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000967

FILED
Apr 20, 2009
Secretary of State

Entity Name: WINTER GARDEN LODGE NUMBER 2165 OF THE BENEVOLENT AND PROTECTIVE ORDER OF ELKS
OF THE UNITED STATES OF AMERICA, INCORPORATED

Current Principal Place of Business:

700 S. 9TH ST.
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

700 S. 9TH ST.
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 59-6072251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODSON, ROBERT
3618 CRYSTAL STREET
GOTHA, FL 34734 US

Name and Address of New Registered Agent:

DEWEESE, RAY G
2715 COVENTRY LANE
OCOE, FL 34761 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RAY G. DEWEESE

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JERNIGAN, MIKE
Address: 275 HARRIS ROAD
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: DEWEESE, RAY G
Address: 2715 COVENTRY LANE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: ARMSTRONG, ALICE
Address: 809 FLEWELLING
City-St-Zip: OCOEE, FL 34761

Title: S () Delete
Name: SMITH, STAN
Address: 320 CINNAMON BARK LANE
City-St-Zip: ORLANDO, FL 34787

Title: T () Delete
Name: FREEMAN, LESLIE M
Address: 2131 NEW VICTOR RD
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: WALLICK, MARK
Address: 308 E GENEVA ST
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ARMSTRONG, ALICE
Address: 809 FLEWELLING
City-St-Zip: OCOEE, FL 34761

Title: D (X) Change () Addition
Name: GOODSON, ROBERT
Address: 3618 CRYSTAL STR
City-St-Zip: GOTHA, FL 34734

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE FREEMAN

T

04/20/2009

Electronic Signature of Signing Officer or Director

Date